

Montana Department of Corrections
Annual Evaluation of Contractor Performance

Contractor Name: _____ Contract Number: _____

Contracted Service: _____

Contract Liaison: _____

Facility/Division/Program/
 Location: _____

Contract Term: _____

Contract Evaluation
 Period: From: _____ To: _____

Annual Contract Value: \$ _____

PERFORMANCE GUIDELINE

EXCEPTIONAL - 5

Generally meets and/or exceeds all, or nearly all, of the contractual requirements and is extremely responsive to DOC requests/needs. The contracted services were provided in a timely manner. Corrective actions were not necessary, or were minimal, and were immediately addressed by the contractor.

VERY GOOD - 4

Generally meets most contractual requirements and is very responsive to DOC requests/needs. The contracted services were provided with minimal issues or concerns. Corrective actions were minimal and were quickly addressed by the contractor.

SATISFACTORY - 3

Generally meets some contractual requirements and is reasonably responsive to DOC requests/needs. The contracted services were provided and DOC staff identified areas of concern, but the contractor addressed these concerns in a reasonable and competent manner.

MARGINAL - 2

Does not meet some contractual requirements and is minimally responsive to DOC requests/needs. The contracted services were provided with several issues or concerns. Corrective actions were identified by DOC staff and were quickly addressed by the contractor.

UNSATISFACTORY - 1

Does not meet most contractual requirements and/or does not meet one or more critical contract requirements and is not responsive to DOC requests/needs. The contracted services were provided with significant issues or concerns. Corrective actions were identified by DOC staff and were not sufficiently addressed by the contractor.

N/A

NOT APPLICABLE (note in comment section)

PERFORMANCE RATING OF CONTRACTOR

Performance	Rating	Score	Comments:
Compliance with Contract Terms	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		
Quality of Services provided	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		
Communication and accessibility of contractor's designated liaison and/or other contractor staff	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		
Overall cooperation and communication with DOC staff	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		
Level of staff professionalism	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		
Staff are knowledgeable and recognize the specific needs of a correctional environment	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		
Staff turnover	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2		

	Unsatisfactory - 1		
Prompt and effective correction of unforeseen situations and conditions	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		

Responsive to department needs/requests that may or may not have been identified in the contract	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		
Reports and/or other required documentation of services were delivered on time and were complete and accurate	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		
Invoices are accurate and are received in a timely manner in compliance with contract specifications	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		
Licensing/Certification requirements met (staff, business, program, etc.)	Exceptional - 5 Very Good - 4 Satisfactory - 3 Marginal - 2 Unsatisfactory - 1		

TOTAL SCORE	0
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Average Score	#DIV/0!
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Overall Assessment: Based on Average Score

Exceptional - 5

Satisfactory - 3

Unsatisfactory - 1

Very Good - 4

Marginal - 2

Per DOC 1.2.9: Contracts will not be renewed with contractors that fail to achieve an overall evaluation rating of less than “satisfactory” – as determined by an assessment of the evaluation of the ratings provided on the Evaluation of Contractor Performance document.

Would you recommend this contractor again?	Yes or No Comments Required	
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Additional Comments - if needed:

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Name & Title of Contract Evaluator:

Signature of Contract Evaluator:

Date:



Contract Liaison/Evaluator must meet with and review Annual Evaluation of Contractor Performance with Contractor.

Name & Title of Contractor

Business Name

Signature of Contractor:

Date of Review:



The Annual Evaluation of Contractor Performance document must be submitted to the DOC Central Office Contracts Management Bureau (CMB) upon completion.

Date Received by CMB:
